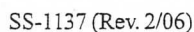


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HAMILTON CO.
ELECTION
COMMISSION
2010 NOV 15 AM 11:00



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>ROBERT BOB Johnson</i>		2. REPORT COVERING THE PERIOD FROM: <i>10-20</i> TO: <i>11-2</i>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)			
First Name <i>BELAIRES BAND</i>	Middle Name	Purpose of Expenditure <i>PLAYED FOR Political Rally</i>	Amount of Expenditure <i>700.00</i>
Last Name/Business Name			
Address			
City <i>77009 Thorpe GA</i>	State <i>GA.</i>	Zip Code	
First Name <i>Old South Res</i>	Middle Name	Purpose of Expenditure <i>Food FOR. Rally</i>	Amount of Expenditure <i>160.00</i>
Last Name/Business Name			
Address <i>Mrs Farland Rd.</i>			
City <i>Russville</i>	State <i>GA</i>	Zip Code	
First Name <i>Map Co Market</i>	Middle Name	Purpose of Expenditure <i>GAS.</i>	Amount of Expenditure <i>30.00</i>
Last Name/Business Name			
Address <i>6514 Ringed Rd.</i>			
City <i>East Ridge</i>	State <i>TN</i>	Zip Code <i>37412</i>	
First Name <i>CAC Custom</i>	Middle Name	Purpose of Expenditure <i>T-shirts For Election Day</i>	Amount of Expenditure <i>108.20</i>
Last Name/Business Name			
Address <i>5802 Ringold Rd.</i>			
City <i>East Ridge</i>	State <i>TN</i>	Zip Code <i>37142</i>	
First Name <i>Family Table Rest</i>	Middle Name	Purpose of Expenditure <i>Food FOR WORKERS on Election Day</i>	Amount of Expenditure <i>117.64</i>
Last Name/Business Name			
Address <i>Ringold Rd</i>			
City <i>East Ridge</i>	State <i>TN</i>	Zip Code <i>37412</i>	
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure
Last Name/Business Name			
Address			
City	State	Zip Code	
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<i>1,095.34</i>



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>Robert Bob Johnson</i>				2. REPORT COVERING THE PERIOD FROM: <i>10-20</i> TO: <i>11-2</i>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount <i>211 23</i>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name <i>Gene Payor</i>		Middle Name <i>E</i>		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>1304 FRELICK DR.</i>				Amount of Contribution <i>200 00</i>	
City <i>EAST BRIDGE</i>	State <i>TN</i>	Zip Code <i>37412</i>	Date of Contribution <i>10-22-10</i>		Aggregate This Election
Occupation <i>RETIRED</i>					
Employer					
First Name <i>Denny Manning</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>230 Sunnydale DR.</i>				Amount of Contribution <i>100 00</i>	
City <i>EAST BRIDGE</i>	State <i>TN</i>	Zip Code <i>37412</i>	Date of Contribution <i>10-23-10</i>		Aggregate This Election
Occupation <i>RETIRED</i>					
Employer					
First Name <i>John Fugate</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>431 Glenhill Rd.</i>				Amount of Contribution <i>20 00</i>	
City <i>CHATT</i>	State <i>TN</i>	Zip Code <i>37421</i>	Date of Contribution <i>10-23-10</i>		Aggregate This Election
Occupation <i>RETIRED</i>					
Employer					
First Name <i>Ray Hu Lins</i>		Middle Name		Contribution Received For:	
Last Name/Organization Name				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	
Address <i>417 Cedar Glen Cir.</i>				Amount of Contribution <i>50 00</i>	
City <i>EAST BRIDGE</i>	State <i>TN</i>	Zip Code <i>37412</i>	Date of Contribution <i>10-29-10</i>		Aggregate This Election
Occupation <i>RETIRED</i>					
Employer					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					<i>370 00</i>



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>ROBERT BOB Johnson</i>				2. REPORT COVERING THE PERIOD FROM: <i>10-20</i> TO: <i>11-2</i>	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)					
First Name <i>BULLDOG</i>		Middle Name <i>MOTUS</i>		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution <i>250.00</i>	
Address <i>3323 W. 1st St. H.L.</i>				Date of In-Kind Contribution <i>10-20</i>	
City <i>ENET Ridge</i>		State <i>TX</i>		Zip Code <i>77412</i>	
Occupation		Employer <i>SELF</i>			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election	
Last Name/Organization Name				Value of In-Kind Contribution	
Address				Date of In-Kind Contribution	
City		State		Zip Code	
Occupation		Employer			
Description of In-Kind Contribution					
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)					<i>250.00</i>

